

Authorization Release of Records

Louisiana Disclosure of Records Statute R.S. 40:41 requires authorization to release birth and death records to individuals who are not entitled.

This form must be completed by the registrant, a member of the immediate family of the registrant, a person named in a court proceeding as a member of the immediate family of the registrant, or the beneficiary of an insurance policy or trust provided by the registrant. Attached must be a copy of the ID of the person authorized to receive a certified copy of the document(s).

This is to authorize you to release the birth/death record of **Birth** **Death**

Full name of Registrant

Date of Birth/Death

Person giving authorization must complete this section.

I _____ authorize _____ to obtain a certified copy of
(Print name of entitled member) (Print name of authorized person)
 above registrant's birth/death record(s) on my behalf.

Address: _____

Signature

The registrant, a member of the immediate family of the registrant, a person named in a court proceeding as a member of the immediate family of said person, or the beneficiary of an insurance policy or trust provided by the registrant must complete this section. A copy of the ID of the authorized person to receive a certified copy of the documents.

Signature

Relationship to Registrant

Signature of parent or legal guardian, if entitled person is under age 18 (legal guardians must submit a copy of judgment of custody order).

Supporting Document(s) Attached:

- ID (entitled member)
- Birth Certificate
- Insurance Policy
- Court Document